

State Fire Marshal's Office
52 State House Station
Augusta, Maine 04333-0052

Application
for
FIRE SPRINKLER PERMIT

207-624-8736 Phn
207-624-8767 Fax
eric.j.ellis@maine.gov

Name of Project: _____

Street Location: _____ Town Location: _____

Fire Sprinkler Contractor Name: _____ License Number:

Responsible Managing Supervisor's Name: _____ License Number:

Designer Contact Person: _____ Contact's email: _____

AutoCAD file sent as an email attachment in place of prints?: Yes: ☐ (Date sent?): _____ No: ☐

The sprinkler work to be done will be: New: ☐ Renovation: ☐ Addition to existing: ☐

The building/structure to be done is: New: ☐ Existing: ☐ Addition to existing: ☐

What is the main activity/use for this building/structure?: _____

Standard(s) Used:

NFPA 13 ☐ NFPA 13R ☐ NFPA 13D ☐ HydroPro ☐ ME Life Safety ☐ Special Hazards ☐ Other ☐

Design Method:

Area Density ☐ Room Design ☐ 2 to 5 Head Calc ☐ Head Spec ☐ Insurance Spec ☐ Pipe Schedule ☐ Other ☐

Hazard Class(es):

Light ☐ Ordinary 1 ☐ Ordinary 2 ☐ Extra Hazard 1 ☐ Extra Hazard 2 ☐ Highest Density on job:

System Type:

Wet ☐ Dry ☐ Foam ☐ Deluge ☐ Preaction Single Interlock ☐ Preaction Double Interlock ☐

Water Supply:

Date of last water test: _____ Static: _____ Residual: _____ Flow: _____

Pump name & model: _____ Rated capacity: _____ gpm at _____ psi

Smallest safety margin for the job:

Calculate Permit Fee:

Comments:

Quantity x Rate=		
	\$1	
	\$.50	

new fire sprinkler heads.

relocated existing heads.

Add this subtotal to the boxes below unless this is less than \$100 & no fire pump is indicated below, or unless this permit is for an NFPA 13D system.

	\$100	
	\$25	
	\$100	
	\$50	
	\$50	
	\$50	

fire pump installations, where pump is listed for fire service.

dwelling units of each NFPA 13D system regardless of # of heads.

\$100 minimum for permits other than NFPA 13D systems.

\$50 extra for preliminary permission to begin installation before the full submittal is received.

\$50 extra for Archive fee for each submittal after 4th nonelectronic submittal/ license year.

\$50 extra for Resubmittal fee.

=Total Fee

Area below is for office use only:

Permit Issued By: _____

Log Number	Date Plans Received	Review Fee	Check Number	Date Fee Received	Date Permit Issued	Permit Number